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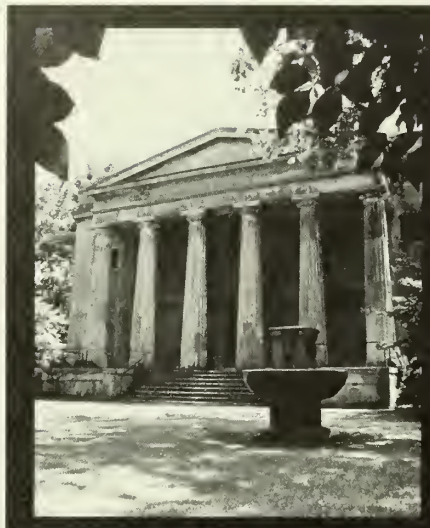
MCG Today



MCG Today

Medical College of Georgia
Spring, 1977 Volume 6, Number 2

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Inside

The Medical College of Georgia now has more than 6,500 alumni. Hugh N. Bussey, M.D. has the distinction of being the oldest living alumnus. He graduated in the Class of '08 and now lives in Oklahoma with his wife. **See page 11.**

Who says research at MCG isn't paying off? On page 7 MCG Today offers a look a what has resulted from Dr. Carl Jelenko's burn research, and on page 4 you will learn why MCG's Dr. Raymond Ahlquist recently received the 1976 Albert Lasker Clinical Medical Research Award. **See pages 4, 7.**

The 1976 Tax Reform Act has made some tremendous changes in estate and gift tax laws. James Austin, executive director of the MCG Foundation, offers some suggestions about getting a check-up for your will as soon as possible. **See page 19.**

About 70 years ago a 20-year-old farm boy from North Carolina 'landed' in Augusta by train. His subsequent rise to fame, fortune, and professional respect among his colleagues has helped the Medical College of Georgia immensely. We are proud to announce that he is the charter member of the newly-formed President's Club. **See page 16.**

Letter to the Editor

Dear Editor:

I have been meaning to write for some time particularly to express my thanks for receiving on a regular basis, MCG Today. I find myself laying everything else aside when it arrives so as to read it immediately which I suspect reflects the feelings of nostalgia about MCG.

However, the cleverness and imaginativeness that goes into each copy probably is as great a stimulus to my curiosity to see what you and your staff will think of next. The ultimate was the recent "calendar edition."

This was simply a tremendous idea and done very well. Congratulations!

Robert A. Liebelt, Ph.D., M.D.

Behind the Lines

By James C. Austin
Executive Director
Medical College of Georgia Foundation

Congress recently enacted the most sweeping estate, gift and income tax changes in decades. All estate plans should be reviewed as soon as possible. Many plans will require modification. The Tax Reform Act of 1976—over 1,000 pages—is one of the most complicated yet. Consult your own advisors on how the new rules apply to your unique situation. Your attorney should be consulted when legal matters are in question. You and your advisors will want to keep effective dates and "grandfather" provisions in mind.

You may have to change your will if you are to take advantage of the new law's tax savings to benefit your family. Please refer to the article on page 19 regarding needed actions to take advantage of the increased estate and gift tax marital deduction and other provisions in the new law. It is advisable to contact your lawyer as soon as possible for an appointment to discuss your will and your estate plan.

We know your first concern is for your loved ones and that you are eager to prevent needless shrinkage of your estate. We sincerely hope that when you review your will and estate plan that you will consider an outright or life income gift to the Medical College of Georgia Foundation to benefit that part of the Medical College's work that is of the greatest interest to you.

Our future development depends greatly upon the support we receive from individuals such as you.

—JCA —

Grover Cleveland Maxwell

This issue of MCG Today carries a story about a man who, for the past five years, has had a profound impact on the health professionals who have graduated from the Medical College of Georgia. Perhaps more so than any single individual he continues to touch the lives of MCG students daily in an unselfish, quiet, unassuming sort of way.

The philanthropy of Grover Cleveland Maxwell has enabled MCG to provide its students with needed financial aid as they pursue health careers. Had it not been for the Maxwell Trust gift of $350,000 to the MCG Foundation, the Foundation could not provide the dollars needed by MCG for federal matching money for student financial aid. Even today, gifts from Mr. Maxwell continue.

As one of the first members of the President's Advisory Council, this enterprising, successful, and respected businessman provides Dr. Moretz with sound wisdom and counsel.

It is indeed an honor and a sincere pleasure for the Foundation to publicly recognize this distinguished gentleman, and officially welcome Mr. Grover Maxwell as the first member of The President's Club.

We are grateful to him, and sincerely thankful for all he has done and is doing for the Medical College of Georgia.

On the cover

Grover Cleveland Maxwell has been a friend of education in the Augusta area for many years. He is among the Medical College of Georgia Foundation's largest donors and the first member of the newly-founded President's Club. Photograph by Richard Crabbe.

Dr. Ahlquist receives pharmacology's highest honor for his clinical research work on alpha-beta receptors

By Julie Guillebeau
From Various Journal Reports

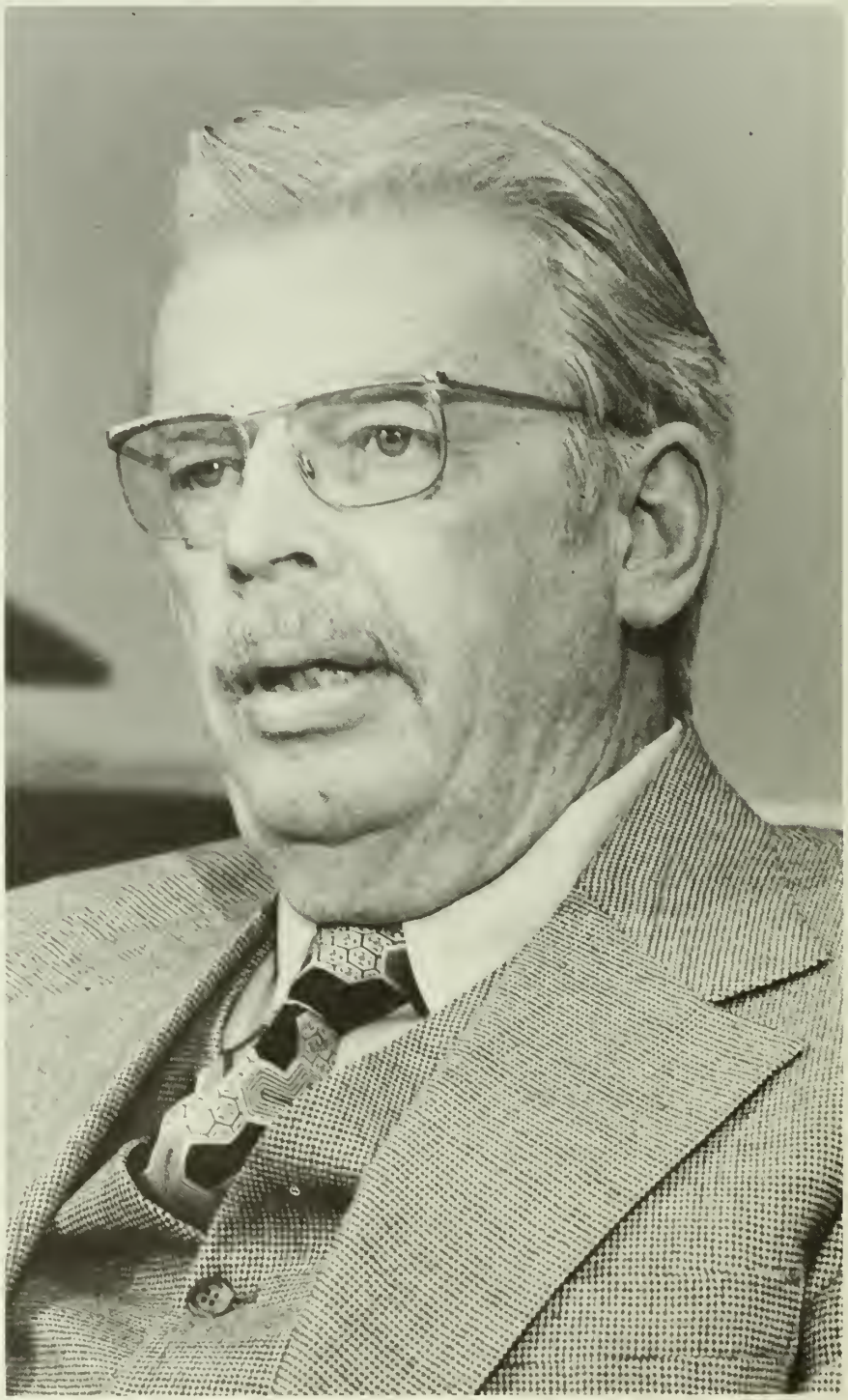
"I belong to a large group of illustrious losers." So says Dr. Raymond P. Ahlquist, Charbonnier Professor of pharmacology at the Medical College of Georgia.

Dr. Ahlquist was referring to the original rejection of his alpha-beta receptor concepts, and not, of course, to the more recent recognition given his concepts and the subsequent work of Dr. James W. Black. Recognition which culminated in the two men being named the 1976 Albert Lasker Clinical Medical Research Award winners.

Dr. Ahlquist recalls when he first publicly proposed his concepts in 1948, he was almost totally ignored. Originally, he was researching to find a cure for dysmenorrhea. That cure escaped him, but the concepts of alpha and beta receptors evolved. Initially he put his thoughts on paper to win the Abel Award of the American Society for Pharmacology and Experimental Therapeutics, but, "I never got it, of course."

In fact, it was only through the help and influence of a friend, William Hamilton (the noted physiologist at MCG) that the *American Journal of Physiology* published the paper in 1948. Prior to that, two journals, including the *Journal of Pharmacology and Experimental Therapeutics* rejected it.

Dr. Michael DeBakey, the world-renowned cardiac surgeon who headed this year's Lasker Jury remarked to a companion regarding the Ahlquist-Black work: "Greatest advance since William Withering," (Introduction of digitalis into medicine).



MCG's Dr. Ahlquist was recently awarded pharmacology's highest honor for his work on alpha-beta receptors. He and Dr. James W. Black of London were named the 1976 Albert Lasker Clinical Medical Research Award winners.

More than 30 years ago, Dr. Ahlquist theorized that sympathomimetic amines produce their effects by activating two types of receptors. These were named by Dr. Ahlquist alpha and beta receptors. He postulated that cardiac stimulation produced by sympathomimetic amines is mediated entirely by the beta-adrenergic receptors.

For the next decade, these concepts, for the most part, were ignored. Then Dr. Black, an Englishman saw the article. At that time Dr. Black was a physiologist at the University of Glasgow Veterinary School and was searching for a chemical agent to relieve agina pectoris by reducing the myocardial demand for oxygen. He is reported as saying that he saw the Ahlquist article and knew immediately what he had to do: develop a drug that would prevent sympathetic nervous stimulation of the heart by blocking the action of norepinephrine on the cardiac beta receptors. He did develop the beta-blocking drug, called propranolol, which was termed by the Lasker Jury as a milestone in the treatment of cardiac diseases and hypertension.

Twenty years ago, Dr. Ahlquist and Dr. Black were alone with their achievement in the scientific community. Today, the Lasker award tops a series of honors and tributes paid the gentlemen, including the Ciba Award of the Council for High Blood Pressure.

And while Dr. Ahlquist was being ignored by the scientific community, he didn't really mind because he was able to use the concepts to explain to his students drug action which didn't fit traditional theories.

Today, he continues spending much of his time in the classroom and supervising research into the area of adrenergic receptors. "A major aim of our research is to clarify the question whether there are really two adrenergic receptors, or, as I now believe, only one. There is some evidence that by changing the environment of the tissues, you change receptor responses. For example, the frog heart at 37 C acts like a beta receptor, as a heart should. If you cool it to 25 C, it seems to turn into an alpha receptor."

Dr. Ahlquist notes that this receptor interconversion, depending upon temperature, hormones and metabolic modifiers suggests that there's only one adrenergic receptor: "Adrenalin is the specific agonist; the 'alphaness' and the 'betaness' are determined by the local environment of the receptor-effector complex."

The implications says Dr. Ahlquist are that the receptor response may be altered by disease.

In his formal Lasker acceptance speech and additional interviews, Dr. Ahlquist states that beta blockade is the basic mechanism in antihypertensive drug therapy. Although the mode of action of propranolol in reducing high blood pressure is not completely understood, a study of all the beta blockers does suggest an important clue to the lines that research should take.

"If all the beta blockers used clinically are compared it will be found that the only pharmacodynamic effect they all share is beta blockade. Some have intrinsic beta receptor agonist action and some are local anesthetics."

"Some are cardioselective blockers, some reduce plasma renin activity, some cross the blood-brain barrier; but all are beta blocking agents and all are effective as antihypertensives. On this evidence we predict that beta blockade is the basic anti-hypertensive action; reduction in cardiac output is the specific effect."

Dr. Ahlquist was born in 1914 in Missoula, Mont. He received the doctorate in pharmacology at the University of Washington in 1940 and has been at MCG nearly all of his teaching career. He is a widely published author with more than 50 scientific articles. He has served on the editorial boards of *Journal of Pharmacology and Experimental Therapeutics*, and the *Federation Proceedings Transplantation Supplement.* He is currently on the editorial boards of the *American Heart Journal* and the *Journal of Clinical Pharmacology.*

On February 9 this year, Dr. Ahlquist was named a Charbonnier Professor by MCG, following approval by the Board of Regents of the University System of Georgia. His appointment made Dr. Ahlquist the third Charbonnier Professor on the MCG faculty, along with Dr. Sam Singal, deal of the School of Graduate Studies and Dr. Robert Ellison, chief of Thoracic Surgery.

During his 33 years of service at MCG. Dr. Ahlquist has served with distinction as professor of pharmacology, associate dean and research coordinator for the School of Medicine and as chairman of the Department of Pharmacology.

The Charbonnier Fund was established in 1966 by the Board of Regents. The professorships awarded from this fund serve to recognize accomplishments of talented individuals in the field of medicine and medical research and, through financial support, it affords the awardees additional freedom to expand their scholarly activities.

Dr. Black is a native of St. Andres, Scotland, and earned his medical degree from the University of St. Andrews. Presently he heads the department of pharmacology at University College, London.

Propranolol, the drug developed by Dr. Black can be used in the treatment of angina, arrhythmias, hypertension and has laid the basis for studies of other potential uses for migraine, essential tremor, alcoholism, drug addiction, anxiety and schizophrenia.

In the US its use has been approved for tachyarrhythmias, hypertrophic suboartic stenosis, pheochromocytoma, angina and all forms of essential hypertension, except hypertensive crisis.

Pharmacology endowment fund total reaches $12,000

In the fall of 1974, the Raymond P. Ahlquist Pharmacology Fund was established with the Medical College of Georgia Foundation. Today that endowment fund totals nearly $12,000.

The success of the fund can be traced to the support of Dr. Ahlquist, the department of pharmacology faculty and staff, and friends of the department.

MCG alumni who have contributed to the Pharmacology Fund to date include:

Dr. Donald M. Gilner
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Atlanta, Ga. 30342

Dr. Mims C. Aultman
610 H. Street, N.W.
Washington, D.C. 20024

Dr. George C. Duncan
138 Hall Street
Spartanburg, S.C. 29302

Dr. L. G. Hicks, Jr.
Clarkesville, Ga. 30423

Dr. Walter J. Brown, Jr.
295 Westgate Drive
Athens, Ga. 30601

Dr. Samuel M. Goodrich
P.O. Box 893
Milledgeville, Ga. 31061

Dr. A. H. S. Weaver, Jr.
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Macon, Ga. 31204

Dr. George P. Sessions
1658 Mason Mill Rd., N.E.
Atlanta, Ga. 30329

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Suite 1A
San Antonio, Texas 78284

Dr. W. D. Lowery, Jr.
419 Fourth Avenue
Albany, Ga. 31705

Dr. Lynn L. Ogden
217 E. Chestnut
Louisville, Kentucky 40202

Income from the fund provides money to support teaching and research programs in the department for which federal or state funds are inadequate or inappropriate.

Contributions to this fund may be sent to: Pharmacology Fund, c/o The Medical College of Georgia Foundation, Inc., Alumni-Foundation House, MCG, Augusta, Georgia 30901. Gifts to the MCG Foundation are tax deductible.

Research pays off for burn victims

By Keith Coulbourn

Bill T., a 24-year-old carpenter, was driving home when he noticed smoke a few blocks up ahead. A moment later he confirmed his worst fears. His own house, where he lived with his father and grandmother, was ablaze. He pulled up, threw open the door of his car and, though flames were raging inside, he ran into the building.

Unfortunately his father and grandmother perished. Indeed, when he staggered out he was himself terribly burned. His face and neck, his arms and hands, chest, abdomen and both legs all around—90 percent of his body—were seriously burned.

With a 65-percent burn—a burn over 65 percent of his body—he would have had a 50-50 chance of surviving. So with his burn, Bill T. had less chance than that. And if he did survive, he would almost certainly have been disfigured.

Fortunately, though, he fell into the hands of Dr. Carl Jelenko, III at Talmadge Memorial Hospital in Augusta. Dr. Jelenko is a founder of the American Burn Association and director of the Burn Inves-

Dr. Carl Jelenko III

tigation Lab at the Medical College of Georgia. He was testing an oil called hELate he's been working on for years, and Bill T. not only survived but also, after 59 days, came out of it almost like new, both pigment and hair returning as they were before.

In another case treated with hELate, Harvey L., a 22-year-old laborer, fell into a 12-foot vat of 200-degree F. water mixed with turpentine while at work. He was wearing heavy winter clothes and couldn't swim in them, so he allowed himself to sink to the bottom of the vat where he pushed off, came to the surface and hauled himself up the impeller shaft of a pump.

Burned over 90 percent of his body, he was brought to MCG 22 hours later. Blisters were all over him, the pain excruciating. A single dose of Dr. Jelenko's oil was administered and in three minutes the pain was gone. Seventeen days later he was discharged with total healing.

hELate was not the only treatment they received, of course. All the usual procedures were followed in their cases. But hELate was the crucial one. Bill T. and Harvey L. were two of 31 persons treated with Dr. Jelenko's oil at the Burn Center during a two-year study up till 1976. An equal number of burn victims during that same time got the same treatment except for hELate, and the comparison between the two groups is significant.

* *Of four burn victims over 55 years old who received hELate, three survived; of six that age not receiving it, three survived.*

* *Of 12 with burns covering 60 percent or more of their bodies, eight survived who received hELate; of three with the same kind of burn who didn't receive it, only one did.*

* *The wounds in all cases treated with hELate closed in an average of 28 days; in those without hELate it took 47 days.*

About the author

The writer of this article is well known to most Georgians who have read the **Altanta Journal-Constitution Magazine** *during the past nine years. Keith Coulbourn has written many medically-oriented stories for the magazine as well as other feature materials. His ability to relate medicine to the individual through his writing is exceptional and we are pleased to have him as a guest writer.*

Burn victim

* *Overall, hospital stays of those with hELate was reduced by 25 to 30 percent, they needed less narcotics for pain and fewer grafts. And nearly all of those who didn't die had a complete return of hair and pigment when treated with hELate while none of the others did.*

Remarkable? Yes, but no more so than Dr. Jelenko's years of research and discovery to find the drug.

He was born in Baltimore 46 years ago and was graduated with a degree in biology at the University of Maryland School of Medicine in 1957. In post-graduate work he was at several hospitals, including Sinai Hospital of Baltimore, the Johns Hopkins Hospital and the University of Maryland Hospital. He was chief of surgery at Kirk Army Hospital, Aberdeen Proving Grounds, in Maryland, in 1963, and an instructor in surgery at the University of Maryland School of Medicine and Hospital from 1964 to 1968, when he came to MCG as an associate professor of surgery.

While at Kirk Army Hospital, he became interested in burns. They're a special category of injury, among the most devestating and complex one can suffer. Oddly enough, most people tend to take their skin for granted, as if it were merely a package. Actually, it's an organ, the body's largest single organ. It holds us together, maintains temperature and a steady water supply inside the body and prevents infection. It's quite literally our first line of defense.

Same patient at left, after hELate

When the skin is burned, the burned area begins to evaporate the body's water at a tremendous rate. That evaporation involves cooling, so the body requires more energy to keep its temperature. With so many bodily functions working in emergency conditions, metabolism is thrown off kilter and the body's basic chemistry is messed up.

A 154-pound person with a 50 percent burn needs 9,000 calories a day at first, for example. Not carbohydrates, though. He needs fat and protein. That's the equivalent of 90 eggs the first day.

After the first day, the burn victim's requirements drop off considerably. He needs only 4,200 calories. But that's still double his normal needs. What happens if he doesn't get that much? His body takes the required calories from his stored body fat and muscles. It's not unusual, Dr. Jelenko says, for such a patient to loose several pounds a day at first.

When the wound begins to close, the need for extra calories is reduced proportionately. But all the while, this extra burning of fuel is putting an added load on his metabolic system.

For about a month he pondered the anomalies in the literature of burns, trying to get a handle on the problem. Then he realized that something must be wrong about (1) the massive evaporation and (2) the assumption that burning the skin kills everything in the skin.

His research proceded on these two main lines.

Dr. Jelenko was working with rabbits and a new electronic device, a partitional metabolic chamber, that provided extremely accurate measurement of water loss, accurate to within 1.2 percent.

He or his associates would shave the rabbit on its flank, anesthesize it so that it would feel nothing, then heat a glass beaker to a red-hot 1,300-degrees F., which is how hot it gets when your clothes catch on fire, and then applied it to the rabbit for 15 seconds. The burned rabbit was then put inside the plastic chamber and the water loss was measured.

He discovered, as he suspected, that the old estimates were grossly exaggerated. Indeed, they were 100 percent off. Instead of losing some 21,000 ccs of water a day, they lost only 10,500. Instead of a 40-fold increase in water loss, it was actually only about 19. And on the second day, water loss dropped to about 2,000 ccs or a four-fold increase over normal.

This was mainly an exercise in basic research. It was important but it had no immediate payoff.

One of their procedures, however, did have a payoff. Still working with rabbits, they were shaving off the fur, desensitizing the skin and burning it with the red-hot beaker, then, when the eschar formed, slicing off bits of it and weighing it, then drying it and weighing it again to determine how much water had been lost.

When they snipped off slices of eschar to weigh it this way, they used to place it on a piece of white filter paper so that it wouldn't get the table dirty. Then they noticed that the slivers left a faint yellowish stain.

Dr. Jelenko says he assumed either that his lab assistant, Morgan L. Wheeler, now a research instructor in surgery in Dr. Jelenko's lab, wasn't cleaning the rabbits properly or they were using especially fat rabbits. He did the job himself. And still the yellow stain appeared.

Now this simply shouldn't have happened. When you burn something at 1,300 degrees F. for 15 seconds, that surely burns it up. They puzzled over the yellow stain. Then Dr. Jelenko says Mr. Wheeler suggested that they analyze the stain to find out what it was.

"Lo and behold," he said, "it was fat, and for all the world, it was fat like that of normal skin."

They didn't know it at the time, but, as they discovered years later, the eschar is not a completely dead crust at all because in a burn the skin never gets hotter than about 170 degrees F. until all its water boils away.

From measuring water loss in the eschar of burned skin, Dr. Jelenko switched his research to the analysis of fats that survive when the skin is burned. In the skin are a large number of lipids, including fats, waxes and oils. Dr. Jelenko can distinguish a dozen groups of lipids, 200 or 300 different kinds. How many survive? What do they do? These were the questions he and his staff worked on for years after moving to MCG in 1968.

Finally they got enough of the yellow stain together to purify it and to estimate what it was. At this point they had narrowed down their search to one of 60 "suspect lipids." And finally, after a painstaking study, they got down to the only one that does the job: ethyl linoleate. It's what keeps water in the skin from evaporating. It's the "EL" in "hELate," his name for the oil. What made it so very difficult to find in analysis is that both air and heat above 80 degrees Celsius spoil it. But since the skin never gets hotter than 78 degrees Celsius (170 degrees F.) even in a bad burn, it survives.

Or some of it does. Normal skin has a .4 percent mixture of ethyl linoleate in it. When it's burned, that drops to .1 percent. In the first day of a bad burn, none of this seems to work, so the skin evaporates water 19 times greater than normal. After the first day, through, it stabilizes and the water loss is only four times as much: which is the same percentage of ethyl linoleate lost in the burn.

Obviously, then, the missing ethyl linoleate of the skin should be replaced in a burn victim as quickly as possible to prevent the disasterous sequence of events that follows. And that's what hELate does to skin without sweat glands.

It's not perfect, however. Dr. Jelenko says it cuts passive evaporative loss from 10,500 ccs a day down to about 700. But in most cases that's enough to keep the body from panic conditions.

When Dr. Jelenko and his staff first isolated the lipid that does the job, they tried it on a rabbit, going through the same procedures they so often had in the past: shaving the flank, anesthetizing it and applying the red-hot beaker to the skin. Now, though, they applied the ethyl linoleate to the wound. Then they watched what happened—and were amazed. At first the eschar formed as usual, a blackish crust. But on about the 12th day the scab became crystaline and began flaking off. And beneath that was normal skin. It even had hair.

This was amazing. Dr. Jelenko says he could hardly believe his eyes. On the 31st day, the rabbit had all its hair.

He doesn't use pure ethyl linoleate on burns, incidently. He mixes it with a preservative and a couple of anti-oxidents, including vitamin E. A batch of this he sent to a fellow researcher in Texas for confirmation. The doctor there, however, decided to experiment in his own way and applied massive doses of it to open cuts in rats. Some of them died. So there is a danger level to the oil, Dr. Jelenko says, which is about 380 times greater than the recommended dose.

Since then, he's discovered a wide range of uses for the oil, not only on burns but also bad sunburns and hemorrhoids, for instance. He got patents in MCG's name and sent the oil to a large pharmaceutical firm which is testing it now. If it passes these tests, and Dr. Jelenko is confident that it will, it should become a standard item in everyone's first-aid kit because it's so inexpensive. A third of a teaspoon of it, enough to treat a patient's burned arms and chest, costs about a penny.

Dr. Bussey, 1908 graduate of MCG, boasts that his Oklahoma pecan tree is as big (if not bigger) than those in Georgia.

Hugh N. Bussey, M.D., Class of '08

By Julie Guillebeau

Dr. Hugh N. Bussey was graduated from the Medical College of Georgia in 1908, and as such, is the college's oldest living alumnus. He was born August 29, 1885 in Thompson, Ga., coming from a large family of long-time Georgians.

The years have left their mark on his physical appearance, his walk may not be as quick as it once was, but the sparkle in his eyes has not dimmed, nor has the mind or wit.

Dr. Bussey is nearly 92 years old. He has seen life at its worst and at its best; watched people die from diseases for which he had no cure and later been able to prescribe a tablet or give an injection to cure others suffering from the same illnesses. He was with medicine as it travelled from the horse and buggy to the super sophistication of the 70's.

Following his graduation from MCG, Dr. Bussey went into practice with his uncle and brother-in-law in Thompson. Soon thereafter he moved to Buckhead and then in 1913, the spirited young doctor headed for the Oklahoma frontier. He was a contract physician for the Pittsburg Coal Company for 18 years, then moved to Oklahoma City and finally to Altus, (where Will Rogers hung out). In addition to his practice, while in the mining town and Oklahoma City, he operated a drug store. He retired in 1971, after practicing his art for more than six decades.

Today, Dr. Bussey is retired and living in Tulsa, Okla with his wife. They have two children and five

grandsons. Their daughter's husband is Jesse Floyd, MD, a '63 graduate of MCG, and their son is an evangelist, and as his mother proudly says, "He's been called a second Billy Graham."

This reporter visited Dr. Bussey last November and found him to be a man who must have been loved by all who knew him, for he is one who can see through life's drudgery, strife and unhappiness to its humor and goodness. And, his good naturedness rubs off on those around him.

That which follows is an edited version of our conversation, presented in this manner so that the reader can glean insight into this charming gentleman.

MCG TODAY: What type of medicine did you practice?

DR. BUSSEY: General practice, but I diverted some, I fitted eyeglasses—put some gold spectacles on one person and then just filled the town full. There was no eye doctor. I also pulled teeth.

MCG TODAY: Did the Medical College prepare you for all this?

DR. BUSSEY: (Laughing) No, they certainly didn't.

MCG TODAY: I understand you started a family tradition of going to MCG.

DR. BUSSEY: You know, I think my brother-in-law did, he's been dead for years, so I can't ask him. My son-in-law Dr. Jesse Floyd went there, he's in Columbia, S.C. now. Then my oldest brother's boy and his two sons are doctors—have a hospital in Austell, Ga. My youngest sister's boy is a doctor in Fitzgerald. And my grandson, he's preparing to enter medical school. I don't know what you call it, there wasn't any prep in my days, you had the money and you went.

MCG TODAY: You were born in Thompson, practiced five years in Georgia and have a great deal of family in Georgia—how, then, did you come to live in Oklahoma?

Dr. Bussey, retired after 63 years of 'doctoring', helps Mrs. Bussey with the chores.

DR. BUSSEY: Guess I just got tired of eating peanuts and popcorn.

MCG TODAY: What do you think of Jimmy Carter being elected President?

DR. BUSSEY: I helped put him there.

MCG TODAY: Can you tell me about being a medical student in the early 1900's?

DR. BUSSEY: Not sure you want to hear all of it. Here's my class (holding a class picture) a lot of these are Augusta boys...T.C. Thompson, Johnson, Cranston, D.D. Smith, Sutton. We were in the building on Telfair Street. My son-in-law drove me past it the last time we were there and some club has it now. Anyway up on the third floor was the dissecting room. We would dissect in January, the upper extremity for the freshman and the lower for the sophomores. Next to the dissecting room was Dr. (T.E.) Oertel's office, he would take charge of medical microscopy, and on the outside of his door, somebody—can't say who—drew a picture of a devil with a pitch fork, and then the phrase 'Oertel is hell'.

MCG TODAY: What was tuition at that time?

DR. BUSSEY: I'm not sure, I got a state appointment and when I got out of school, I owed about $700 and it took me 6 or 7 years to pay that back—that's how much money I made in those days.

MCG TODAY: You arrived in Oklahoma just six years after it gained statehood, was it a rugged life?

DR. BUSSEY: Yes, there were no roads in many places, used to ride horseback or use a buggy. Had to follow the fences, cause the cattle made trails everywhere to and from the ponds, couldn't follow them. Wore a sheepskin under my

shirt and heavy clothing, 'course wasn't as fancy as in this day and time, but it kept me warm.

MCG TODAY: Your first experience in Oklahoma, in the mining town, was it mostly just putting people back together?

DR. BUSSEY: Mostly, I had 500 miners and their families. The company had four mines. I did make some changes. I had small huts built at each mine and equipped with first aid and emergency supplies. Then we organized first aid teams to handle the emergencies.

MCG TODAY: You were truely an old time "Doc" going out in the middle of the night or many miles just to deliver a baby.

DR. BUSSEY: I kept track until I got to about 4,000 babies, then I quit counting. Home deliveries too.

MCG TODAY: What do you think of the trend now to go back to home deliveries?

DR. BUSSEY: Well, that's where they ought to have stayed. A bed makes as good a delivery table as you've got. Got electric lights, carried an extension cord to do episiotomies and those kind of things. Need somebody to sit here and here (motioning to each side of the bed), patient lying here with her feet propped up. I delivered most of those babies and never saw the woman's privates. Did it under the covers—that's the way I was taught.

MCG TODAY: Why did you open a drug store?

DR. BUSSEY: I got tired of paying the druggist, so I just went and got the license myself. Sold it during the depression and moved to Altus.

MCG TODAY: I understand you were the first chief of staff at the Altus hospital.

DR. BUSSEY: Well, this other doctor and I ran that hospital, the old one, and they built a new one. They elected me chief—guess I hadn't been there long enough to make any enemies.

MCG TODAY: I can't imagine you making enemies, in fact I bet you are greatly missed by your patients.

DR. BUSSEY: Well, I miss them—haven't earned an honest dollar in five years. Doctoring all those 63 years isn't as hard as retirement.

MCG TODAY: What about medicine today?

DR. BUSSEY: I think we'd be better off without the government getting into it. They've been meddling in it too much here lately, last few years. I think if they'd leave the doctors alone instead of trying to government them and regulate the medicine that we can have in this country, we'd be better off.

MCG TODAY: What about today's doctors?

DR. BUSSEY: They're lazy and too expensive. My wife has hypertension and if it weren't for medicare, I'd have to treat her myself. I always made it a rule never to doctor my own family, otherwise I figure they have a fool for a doctor.

MCG TODAY: What about yourself, do you care for yourself?

DR. BUSSEY: Well, I never been doctored except here about three or four years ago, I had to have a gall bladder operation.

MCG TODAY: To what do you attribute your good health?

DR. BUSSEY: Well, I didn't get here from laying up in a rest home, I tell you that. I don't smoke or drink coffee. We were going on a trip up Pike's Peak and I was about half froze, so I drank a cup of coffee—I belched it the last time when I got to Dallas. Haven't had a cup since, and if I every marry again, I gona find out if my wife drinks coffee. I smoked cigars, tried a pipe, but there wasn't much to it. My boy when he was about 11 or 12 asked me to quit. I told him that if he'd promise never to start, I'd quit. He took me up on it.

MCG TODAY: Did you have a Swine flu shot?

DR. BUSSEY: Yes, m'am. Well now that was a busy time when they had the flu in '18. This other flu hasn't been as bad—have more modern medicines and vaccines for it. I never had a case of the flu, I treated a town of over 1000 people. Kept the druggist making me up some capsules all the time. It was afterwards I had Massengil Company, or was it Texas Chemical, I don't remember which, make me 1,000 or 2,000 at a time, doze powder, camphor and aspirin. I buy 'em now. I sent my sister-in-law to the drug store the other day to get some—best cold medicine in the world.

MCG TODAY: You've practiced medicine 63 years, and from our conversation today, all those years were packed with work. Didn't you take time off?

DR. BUSSEY: Went duck hunting (with a chuckle)—killed 13 ducks with one shot.

MCG TODAY: Would you care to explain that?

DR. BUSSEY: It was early one morning I got in my boat, let the wind just blow me along, and directly I could see something dark on the water, and it would change shapes and I heard a duck go 'quok-quok'. I decided it was a big bunch of ducks and I shot once and then fell to the bottom of the boat to keep the ducks from hitting me in the face. After it began to get light, I picked up 13 ducks, put 'em in my car and drove back to town.

MCG TODAY: Any witnesses?

DR. BUSSEY: No, (laughing) but I had the ducks.

MCG TODAY: Thank you Dr. Bussey.

Searching

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Grover Cleveland Maxwell: "When I was a boy, we never had anything to give away."

By Richard Crabbe

He "landed" in Augusta early on a Sunday in 1907, a 20-year-old farm boy from a small eastern North Carolina community, his first trip so far and for so long away from home.

He was such a stranger to the city, such a neophyte traveler, that he jumped from the train as it crossed Broad Street, not sure that he could find his way from Union Station to the Broad Street address he sought, a furniture store run by his brothers.

None among the early morning strollers on Augusta's streets could have guessed that the young man, making his way the half dozen blocks from the railroad crossing, to the small Broad Street shop, would one day be one of the city's most prominent residents and among the most enterprising—and successful—businessmen in the South.

Seven decades have passed since Grover Cleveland Maxwell reached the terminus of that overnight train ride from Resaca, N.C., and it's 70 years that he looks back upon with obvious relish.

In that time, Maxwell and his family have not only bolstered their own fortunes, but those of the community as well.

It was the Maxwell family, for instance, which five years ago gave the Medical College Foundation a much needed boost with a gift of nearly $350,000, money from which income is used entirely to aid students in pursuit of higher education at MCG.

Maxwell and his two older brothers, Robert and Bert, turned, during their years, a struggling business started with borrowed money and gifts and based on a new business—retail credit—into a blooming chain of furniture department stores spread across three southern states.

"I went to business school in Raleigh for about 30 days—I had planned to go for two or three months," smiles Grover Maxwell, "but I got a call from my brothers...they said they were moving to a new store and needed me to help.

"When I came here, Algernon Morgan turned the office over to me...he was tired of working in the office. I helped him wait on the store in the daytime and I did the bookwork at night," remembers Mr. Maxwell. "That's where I started.

The business Mr. Maxwell joined began in 1904 as a partnership between Morgan and brother Bert, both of whom had worked for another Augusta furniture dealer, a distant cousin of the Maxwells. Each man contributed $1,500 to the partnership and Morgan & Maxwell was in business.

Grover Maxwell writes, in a

brief biography of the Maxwell Brothers venture, that "furniture selling on the installment basis was rather slow" in the early days. Often salesmen would canvass area neighborhoods, riding bicycles, selling furniture door-to-door. The same salesman was usually also responsible for returning to the customers' houses to collect on the installments.

It was, to be sure, a rather modest beginning. Mr. Maxwell and his two brothers built slowly on their original holdings, developing a steady, healthy business in Augusta. As time passed, though, they began to expand—five stores in Georgia and South Carolina by 1921 and 13 by the end of the decade. By the mid-40s, the Maxwell furniture chain had grown to such proportions that the three brothers made the decision to incorporate, laying the way for even further expansion.

While the Maxwells are now best known for their business achievements, they may one day be better remembered for activity in another area: education.

There were eight children on Gilbert Maxwell's tobacco farm, and as was the custom in the late 1800s, farm work came ahead of everything else. Of the three brothers who eventually made the trip south to Augusta, none received much formal education beyond high school. Only two of the seven boys went on to complete college: one became a dentist, the other an engineer.

The Maxwell involvment in

Grover and Corrie Ann Maxwell celebrated their 50th wedding anniversary last year (top and center), gathering three generations of Maxwells together for the event (bottom.)

education came, as Mr. Maxwell explains, out of an interest in helping their employes and putting some of the money they earned in the community back to public use.

So their first active involvment in education sprang from the business in 1943 with the establishment of the Gilbert Maxwell Memorial Trust.

Back in the 40s we set up this fund for our employes and their children. They had their own group that did the picking and handled the details. I guess they spent about $25,000 a year for scholarships.

The fund eventually grew to almost $350,000, mostly securities held in trust, and continued for years to provide children of Maxwell employees with money for college. Then the Maxwells sold their holdings in the furniture chain in the late 60s, and as Grover Maxwell recalls—in modest tones—"we didn't have much use for the fund and didn't have anybody to look after it, so we just gave it to the Medical College."

Two years later, the Maxwells gave still another large gift to the Medical College in support of its Sesquicentennial Endowment Fund. This fund, which now totals $50,000, was donated in honor of Mr. Grover and his wife of almost 50 years, Corrie Ann Maxwell.

This fund, however, was only the beginning of a long, rewarding relationship between the Maxwell family and needy students. Grover Maxwell is quick to note that the family made numerous donations over the years directly to many schools, among them the Medical College, and gave direct scholarships to students.

"I give a lot of students individual scholarships," says Maxwell. "There were about six nurses one year who I found out lacked about $3,000 of having their scholarships. So I gave it to the school."

Mr. Maxwell rarely puts any stipulation on his gifts, but he recalls one instance when he tied a string to a donation.

"This fellow came to me asking for some money to study in West Germany. But I told him he needed a haircut," Maxwell laughs, "then come back and I'd talk to him. He got his haircut, and when he came back I gave him the money he asked for, about $1,000 or so, I believe."

But it's the large donations that have been of foremost aid in furthering education in the city. There is, of course, the Gilbert Maxwell Fund—as well as the $50,000 fund in honor of Grover and his wife, Corrie Ann—at the Medical College. And four years ago, Mr. Maxwell's three sons—Grover Jr., George and William—donated $150,000 for the establishment of an endowed chair in business administration at Augusta College. The Maxwells also become active during the 30s in Rotary International's L.B. Evans educational fund.

His ties with the Medical College go beyond money. Grover Maxwell has always viewed MCG as one of the major assets in Augusta both business and educational. His contributions to the growth at the college have been recognized over the years, recognition that was capped in 1975 when he was named one of the first members of MCG's President's Advisory Council.

The Maxwell involvement in community affairs doesn't stop with education. Both of Mr. Maxwell's older brothers, Bert and Jeff, helped boost the fortunes of the local YMCA in earlier years. It was largely due to the Maxwells' efforts that the downtown YMCA was built, and Bert donated land in Burke County for the YMCA camp that now bears his name.

It was Jeff who, shortly before his death, made certain that a long-needed branch of the Richmond County library was constructed in South Augusta.

How, then, does one account for the Maxwell philanthropy. Mr. Maxwell states it simply and to the point: "We had a lot of people working for us—I had 36 furniture stores. We made good money and I wanted to fund for education so if a boy working for us wanted to go to college, we could help him." But Maxwell sees this practice as a dying one, not because of a lack of generosity he contends, but as a result of modern business financial structure.

"There aren't that many people in business anymore interested in helping somebody in education, because there aren't a great many businesses that make enough money to do it. The little individual stores can't do it...they do well just to make a living, don't they?

"When I was a boy, we never had anything to give away. My father was a poor man, he was a farmer. Oh, we had business and we always made some money...he helped us get started in business, but it's harder to do that today. You need a lot more money."

Despite the decline he sees in large-scale philanthropy, Grover Maxwell still perceives that people give money away for the same reasons.

"I don't think there's any question about it," he says. "I think anybody who's got a big organization—if they're worth a damn and they make any money—likes to have some funds that they give away and do some good for the public. We make our money out of the public...I believe in doing something for the public."

HOW LONG SINCE YOUR WILL HAD A CHECK-UP?

by James C. Austin
Executive Director—MCG Foundation

If you don't review your will regularly, the consequences could be hazardous to your beneficiaries' financial health.

Has your will gone unchecked for several years? Wills are far too important to forget about after they're made. The 1976 Tax Reform Act has caused many wills to be out-of-date.

The new Tax Reform Act has made some tremendous changes in estate and gift tax laws. Some of us may discover that the tax costs of transferring assets to family members have increased, but most individuals will find that estate and gift taxes will be decreased or eliminated. To take advantage of the new law's tax savings you should get with your lawyer to bring your will up-to-date.

A few things to think about

Before going to your lawyer for a drafting, an amendment, or a replacement of your will, here are a few things you should think about and decide:

1. **Reflect long and carefully upon how you want your property distributed.**
2. **Reflect upon the various contingencies which may occur before or after your death.**
3. **Choose a person or bank trust department to be your executor (or both to be co-executors). Carefully select the person you wish to manage and settle your estate according to your instructions. You can save the expense of a bond by stating that your executor need not furnish one.**
4. **Prepare a list and divulge all the facts about your assets and personal objectives so your attorney can draft the best possible will for you.**
5. **You have the right to name the person or persons you want appointed guardian of your children subject to your wife's rights. Your wife will usually be appointed guardian by the court if you have no will but she may be required to furnish a bond and account for all the expenditures made from the childrens' property until they reach legal age. Through your will you can dispense with the bond and accounting requirements.**
6. **Consider the advantages of creating a trust for your wife, children or others. A trust may protect your estate against loss or dissipation which might result from your heirs' inexperience or inadequacy.**
7. **Determine how much from your estate you can give to your church, the Medical College of Georgia Foundation, Inc., or other charities at little cost to your loved ones. The Tax Reform Act continues the long-established tax incentives to charitable giving.**

Undoubtedly, your underlying desire in planning or replanning your will is to provide the fullest financial security for your loved ones.

Leaving all your estate to your spouse may or may not be the best way to accomplish this objective. For example, what kind of security do you want for your spouse? Do you prefer immediate wealth or a steady income? Should your spouse have money management responsibility? How should your property be used when your spouse dies?

Some other arrangement

It is quite possible that some arrangement other than an outright bequest will best carry out your real objective. It's worth investigating. The first step toward a truly sound will is to analyze and focus on your true objectives.

Then, rely on your attorney for the tools to carry out these objectives—a trust, an annuity, or an outright bequest. With this cooperation you can create a will that is practical, and emotionally and financially satisfying.

If your present will hasn't taken the 1976 Tax Reform Act into account, your will is out-of-date and we urge you to review and revise it.

A will may remain physically intact, and even legally valid, yet become functionally disabled. Unexpected events and unforseen developments can damage, or perhaps destroy, the will's ability to accomplish what is was intended to accomplish.

For instance, does your will provide for the education of children or grandchildren? Sums that seemed ample only a few years ago already may be inadequate.

Any substantial increase or decrease in the total value of your estate is, of course, a signal that your will should be reviewed and adjusted.

continued

May be Outdated

Wills may be outdated by personal or family developments such as: marriage or divorce; birth of a child; death of a beneficiary; change of residence from one state or another; unavailability of persons who are supposed to serve as executor, trustee, or guardian; retirement; changes in the needs and attitudes of beneficiaries; and etc. These reasons for reviewing and revising a will may seem obvious but many people overlook them and fail to take corrective action.

You should make certain that your will takes advantage of provisions in the new Tax Reform Act and does everything possible to conserve your estate and protect your beneficiaries. For example, some wills should be changed to take maximum advantage of the new law's bigger marital deductions. In general married persons will be allowed to leave their spouses tax free up to $250,000 or one-half their adjusted gross estates whichever is the large amount. Married persons will also be able to deduct the first $100,000 of property given during life to their spouses. Wills drawn before 1977 and containing maximum marital deduction formula provisions are interpreted to mean 50% of the adjusted gross estate and not up to the greater of $250,000 or 50%.

Again, the Tax Reform Act continues the long-established tax incentives to charitable giving. The unlimited estate and gift tax charitable deductions remain—so there is never a tax on a qualified charitable gift, no matter how large. When you consider including in your will a bequest to the Medical College of Georgia Foundation, Inc., we will be glad to consult with you and your lawyer. Please call on us. We would like to give you additional information about charitable gifts and discuss with you and your advisors the most advantageous ways to make them.

New Foundation annual giving program highlighted by special giving clubs

By Laurence Christensen

Desk drawers and little-used files at the Medical College of Georgia hold dusty treasures. Just recently a list of early MCG graduates was uncovered. The earliest graduated in the 1830's, and latest on the list are members of the Class of 1929. Sulieman H. Abaza from Lagizig, Egypt, Class of 1913, leads the alphabetical list, just as he still does today.

Another rather distinguished list recently located includes all of those individuals who were members of The Century Club. This list begins on May 1, 1962. Hugo Mella, of the Class of 1913, is the first name on the list. Members contributed $100 or more annually to MCG through the MCG Foundation.

On November 20, 1976, the trustees of the MCG Foundation met in Atlanta and voted to extend the life of the old Century Club. They based their action on the first by-law of the Foundation, which says, "All persons who shall make any donations or contributions of money or property to the corporation shall be known as "Friends of The Medical College of Georgia" or such other designation as from time to time shall be selected by the Board of Trustees...." Sixty-seven alumni and other friends have joined The Century Club since November. Dr. David Robinson of Savannah Beach apparently read about it in the Fall '76 *MCG Today*, and joined immediately, thus becoming the first member of the new Century Club.

The Foundation trustees also gave final approval for a complement group of organizations similar to The Century Club. One, *The Aesculapius Club*, honors individuals who contribute between $250 and $1,499 annually.

The name Aesculapius has a special meaning in the traditions of MCG. Of course, the staff of Aesculapius represents the healing art of medicine, while stylized versions represent many other health related professions, including dentistry. For several decades, the name Aesculapius has had a prominent place in preserving memories and traditions of all disciplines represented at MCG because the yearbook has carried this name.

Membership in The Century Club or The Aesculapius Club is annual. That is, membership expires on July 1st of each year (This allows members to choose which of two tax years they wish their gift to fall within). In two new special clubs, however, membership does not expire.

The Presidents Club: Membership in The Presidents Club is participatory by nature. Members are invited to meet periodically with the President and members of the Medical College staff to discuss objectives, plans, problems and progress, and they are recognized as special ambassadors of the school. It honors the four able presidents who have led MCG: Dr. G. Lombard Kelly, Dr. Edgar R. Pund, Dr. Harry B. O'Rear, and Dr. William H. Moretz. Their lifelong dedication to leadership and personal support of The Medical College of Georgia have established a standard which members of The Presidents Club will preserve and convey to future generations.

Each member has personally or through an organization contributed or pledged $50,000 or more through the MCG Foundation. There are several ways to accomplish this. One "budget plan" which qualifies for membership involves contributing $5,500 or more per year for the next ten years. Other options are also available.

The Founders Club: This important group honors those who had the foresight to begin, and also those who had the courage to continue, the work of The Medical College which has benefitted so many people. Members of The Founders Club are equally foresighted and equally committed to excellence in our own time.

Each member has personally contributed $10,000 or more through the MCG Foundation. Again, one of the membership options is to spread the contributions over a period of ten years, at the rate of $1,500 annually.

The alumni of all five schools will be interested to know that membership in any of the four clubs will automatically pay their respective alumni association dues for at least one year, and in the case of The Presidents Club, for fifteen years. The entire contribution is credited toward club membership, after which the Foundation automatically deducts current year alumni dues and pays it for you. If you wish to pay dues separately, you must specifically state this when you apply for membership.

Funds contributed through The Century Club or The Aesculapius Club may later be credited toward membership in either The Presidents Club or The Founders Club, going back as far as May 1, 1962 for former Century Club members, and as far back as December 20th, 1973 (the beginning of the Sesquicentennial Endowment Campaign) for most other former donors.

New graduates will be informed individually about a new group formed especially for their benefit. It's called The Associates of The Aesculapius Club.

Detailed information on all five of these special giving clubs is being prepared, and an invitation will be extended to you to join in the near future.

Sesquicentennial Endowment Fund Summary

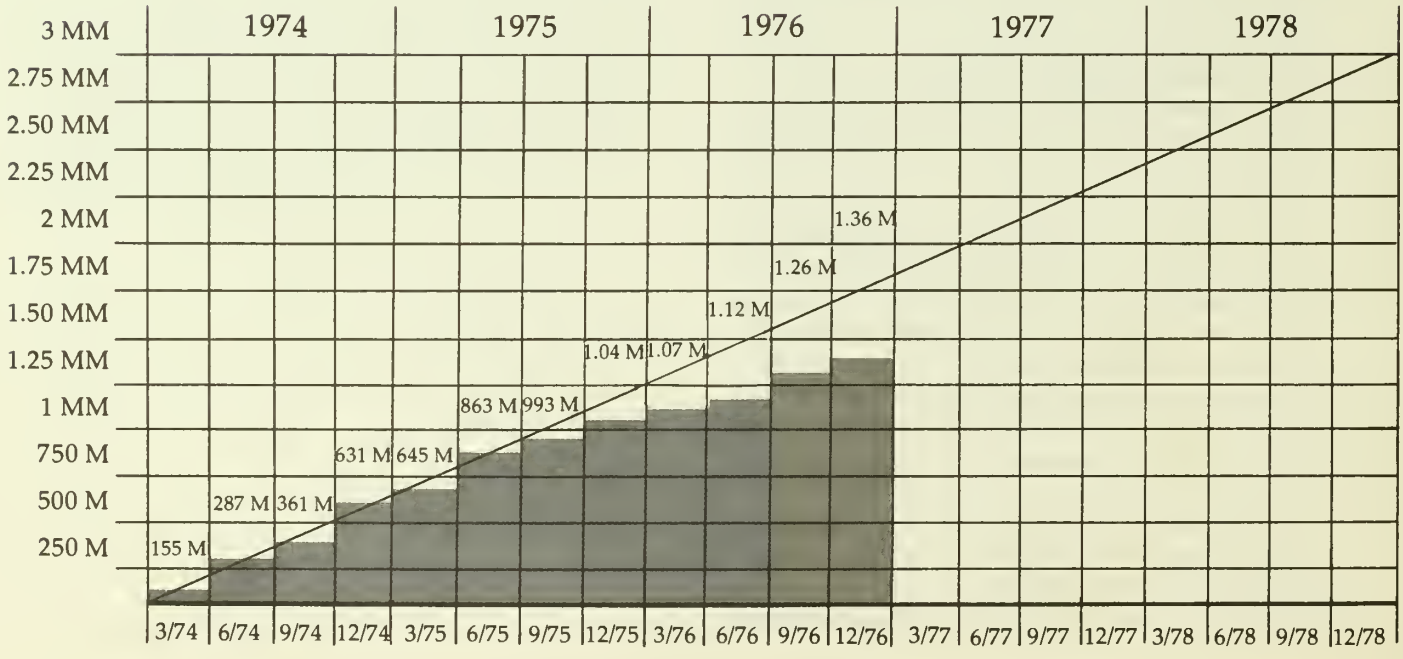
SUMMARY (Totals by constituency all regions)

JANUARY 1977

	Year to Date			Campaign to Date			
	No.	Amount Pledged	No.	Amount Paid	No.	Amount Pledged	No.	Amount Paid
*F & S	(1)	(700.00)	1	775.00	969	349,325.73	2604	178,908.33
Individuals	(1)	(5,000.00)	1	100.00	113	187,550.69	113	164,550.69
Corporations	7	110.00	10	1,810.00	88	252,465.00	97	123,127.72
Foundations	1	100.00	1	100.00	27	140,652.88	28	109,152.88
Alumni	25	3,100.00	34	3,565.00	735	424,728.47	834	256,661.29
Parents	—	—	—	—	—	—	—	—
TOTALS	31	(2,390.00)	47	6,350.00	1932	1,354,722.77	3676	832,400.91

*All faculty and staff are recorded in the Augusta area

Graph shows quarterly progress of the Sesquicentennial Endowment Fund pledges since the kickoff of the campaign in 1974.



Report at a Glance: Through January 1977

SUMMARY (Totals by region all constituencies)

JANUARY 1977

Region	Year to Date No.	Year to Date Amount Pledged	Year to Date No.	Year to Date Amount Paid	Campaign to Date No.	Campaign to Date Amount Pledged	Campaign to Date No.	Campaign to Date Amount Paid
1 Albany	1	25.00	1	25.00	56	39,995.20	61	25,598.62
2 Athens	—	—	—	—	27	10,185.00	33	7,310.00
3 Atlanta	6	380.00	8	880.00	90	45,650.20	106	30,554.70
4 Augusta	5	(615.00)	12	2,715.00	1193	788,314.08	2866	403,372.07
5 Brunswick	—	—	—	—	6	660.00	6	660.00
6 Columbus	3	800.00	4	300.00	37	99,990.00	59	53,348.33
7 Gainesville	—	—	—	—	10	45,805.00	16	39,080.00
8 Macon	5	500.00	7	750.00	99	38,941.04	87	27,851.04
9 Rome	—	—	—	—	52	29,472.69	53	16,645.69
10 Savannah	2	575.00	2	575.00	52	26,510.00	56	21,410.02
11 Valdosta	—	—	—	—	11	6,680.76	13	5,788.60
12 Waycross	—	—	—	—	8	12,360.00	9	4,660.00
13 Dublin	—	—	—	—	6	1,625.00	8	1,075.00
14 Thomasville	—	—	—	—	10	1,775.00	11	1,900.00
15 Statesboro	—	—	—	—	20	125,436.05	22	122,464.84
16 Griffin	1	250.00	1	250.00	5	540.00	5	540.00
17 Tifton	3	160.00	3	160.00	10	1,360.00	10	1,360.00
18 Carrollton	—	—	—	—	2	125.00	2	125.00
Out-of State	5	(4,465.00)	8	595.00	238	79,297.75	253	68,657.00
TOTAL	31	(2,390.00)	47	6,350.00	1932	1,354,722.77	3676	832,400.91

Alumni participation by class on following page.

SESQUICENTENNIAL ENDOWMENT FUND
ALUMNI PARTICIPATION BY CLASS
through January 31, 1977

CLASS YEAR	NO. OF DONORS	NO. IN CLASS	% GIVING TO ENDOWMENT	TOTAL AMOUNT PLEDGED	AVERAGE GIFT
1911	1	26	3%	100.00	$ 100.00
1917	1	11	9%	300.00	300.00
1919	1	8	13%	100.00	100.00
1921	2	20	10%	150.00	75.00
1923	1	10	10%	1,100.00	1,100.00
1924	2	31	6%	2,100.00	1,050.00
1925	1	25	4%	100.00	100.00
1926	3	24	13%	375.00	125.00
1927	5	27	19%	1,565.00	313.00
1928	6	36	17%	1,475.00	245.83
1929	6	35	17%	320.00	53.33
1930	3	30	10%	380.00	126.67
1931	1	27	4%	60.00	60.00
1932	9	38	23%	1,650.00	183.33
1933	6	38	16%	1,625.00	270.83
1934	7	39	18%	1,915.00	273.57
1935	5	34	15%	5,625.00	1,125.00
1936	4	37	11%	435.00	108.75
1937	7	33	21%	600.00	85.71
1938	8	34	24%	4,752.00	594.00
1939	3	32	9%	610.00	203.33
1940	5	32	16%	7,651.68	1,530.34
1941	9	37	24%	10,515.00	1,168.33
1942	11	42	26%	3,800.00	345.45
1943	23	91	25%	42,420.00	1,844.35
1944	13	60	22%	38,885.00	2,991.15
1945	15	64	23%	13,560.00	904.00
1946	17	68	25%	13,554.00	797.29
1947	17	66	26%	4,080.00	240.00
1948	18	66	27%	8,785.00	488.06
1949	16	68	24%	19,925.00	1,245.31
1950	13	79	16%	7,025.00	540.38
1951	28	74	38%	10,755.00	384.11
1952	16	76	21%	7,420.00	463.75
1953	20	81	25%	9,525.00	476.25
1954	18	73	25%	7,430.00	412.78
1955	18	76	24%	9,000.00	500.00
1956	23	67	34%	31,035.00	1,349.00
1957	20	94	21%	10,065.00	503.25
1958	20	116	17%	20,815.00	1,040.75
1959	20	116	17%	12,860.00	643.00
1960	17	121	14%	8,985.24	528.54
1961	22	93	24%	5,560.00	252.73
1962	19	106	18%	2,645.00	139.21
1963	20	102	20%	6,290.00	314.50
1964	17	120	14%	18,615.00	1,095.00
1965	17	140	12%	5,443.00	320.18
1966	16	140	11%	10,050.00	628.13
1967	21	171	12%	12,465.00	593.57
1968	13	177	7%	2,255.00	173.46
1969	10	206	5%	1,665.00	166.50
1970	10	237	4%	692.00	69.20
1971	10	240	4%	1,725.00	172.50
1972	5	219	2%	345.00	69.00
1973	10	361	3%	589.75	58.98
1974	11	520	2%	400.00	36.36
1975	18	809	2%	832.37	45.74
1976	2	985	2%	15.00	7.50
	660	6,788	9.7%	$393,015.74	$595.48
INTERNS & RESIDENTS AT MCG	9	———	———	$1,525.00	$169.44
TOTALS	669	6,788	9.9%	394,540.74	$589.75

national news

new MCAT

The 30-year-old Medical College Admission Test is being replaced by a longer, more modern version which took five years to develop. The test, sponsored by the AAMC, was developed at a cost of $1 million. The number of items has been increased from 221 to 361 and the MCAT will now take 6 hours to complete.

The new test represents an attempt to measure the applicants ability to analyze and evaluate information in much the same way that a physician in practice diagnoses a medical problem. The developers feel that the new MCAT can measure a greater array of skills without requiring more knowledge on the part of the examinee.

The test is now being evaluated at 20 medical schools and should be ready for use by this spring. In the meantime, James Erdman, director of AAMC's Division of Educational Measurement and Research, says that AAMC is taking a look at the possibility of developing a test which measures not only cognitive skills and achievement, but the "personal qualities" that make for a good doctor.

(Science, **vol. 194, no. 4267, p. 817, Nov. 19, 1976).**

computer diagnosis birth defects

A computer system capable of supplying doctors with indepth diagnostic information about birth defects has been developed by the National Foundation-March of Dimes, Tufts-New England Medical Center and MIT. The computer will permit the physician to submit his patient's symptoms and in seconds receive pertinent diagnostic information.

The computer system will be hooked into the public telephone system and doctors will be able to dial the central unit 24 hours a day from computer terminals in hospitals and other facilities.

Clinical trials are now being conducted and the system is expected to be operational after a six-month test period.

(Science News, **vol. 111, No. 2, p. 28, Jan. 8, 1977).**

amphetamine abuse

Since their introduction into pill form in the 1950's, amphetamines have become a major problem in terms of physical damage and emotional dependency. Studies have shown that most of the estimated 2.25 million Americans who regularly take prescribed amphetamines do so for illegitimate purposes.

Although Food and Drug Administration and Drug Enforcement Administration statistics report that amphetamines are of marginal use in combating fat, obesity remains the condition for which the majority of amphetamines are prescribed. Research has shown that although diet pills curb the appetite for a short time, tolerance is quickly built and the appetite returns completely when the pills are removed.

Tenative evidence also indicates that amphetamines or amphetamine-like drugs taken during the early weeks of pregnancy may cause fetal heart defects and other malformations.

(Science, **vol. 194, No. 4269, pp. 1027-1028, Dec. 3, 1976).**

low risk cigarettes

Research indicates that low-toxicity cigarettes may hold significant promise in the prevention of diseases related to smoking.

After 20 years of antismoking educational campaigns, 55-60 million Americans still smoke, and the habit is increasing among teenagers and women. Research, therefore, is concentrating on ways to protect individuals who continue to smoke despite all warnings. This research is now focused on two methods: removing toxic smoke components and thus reducing specific hazards, and reducing the total amount of smoke intake. The latter method is based on dose-response evidence which has shown a direct relationship between the amount of smoke taken in and the occurrence of disease.

The technology to achieve these results has been developed and according to researchers, can be applied to commercial cigarettes. These cigarettes will not conform to traditional flavor patterns, but the developers, pointing out that today's cigarette is only one-half as strong as it was 15 years ago, feel that consumer perception can be changed and that compensating flavors and fragrances can be added.

(Science, **vol. 194, no. 4271, pp. 1243-46, Dec. 17, 1976).**

campus news

patients move to Sydenstricker

The first patients were moved from Talmadge Memorial Hospital to the new Sydenstricker wing January 4th. The first unit to move was 5N, a nursing unit, which moved to 5W.

The Sydenstricker wing has a capacity of 240 beds. The first two floors house general services such as the administrative offices, the pharmacy, laboratories, radiology and nursing service. The third floor is neurology and neurosurgery; fourth is surgery; fifth, internal medicine; sixth, vacant; seventh, ob-gyn and eighth, pediatrics.

Two units, Medical Intensive/Coronary Care and Surgical Intensive Care, now occupy new quarters in Talmadge. The new CCU facility, now located on 5 North, is equipped to handle up to 10 cardiac patients at a time and is fitted with state-of-the-art monitoring and emergency care systems. Surgical ICU is now located on the fourth floor of Talmadge. This unit now contains six regular intensive care beds as well as two rooms equipped to handle special cardiac, circulatory-assist or contaminated cases. Two additional rooms will be available for intermediate-care patients.

singled out

MCG School of Nursing alumna Mrs. Lucile Holsinger was singled out for honors in February by students and former classmates, who presented this silver punchbowl to the school in her behalf. Mrs. Holsinger earned her Masters degree from the school in 1973, following her retirement as a nurse of more than 40 years. The bowl was presented to the school by graduate student Betty Page.

new dean of nursing

Dr. Neila Poshek has been named dean of the School of Nursing at the Medical College of Georgia. Dr. William H. Moretz, MCG president, announced that the appointment will be effective July 1.

Dr. Poshek is presently dean of the College of Nursing at the University of Tulsa in Oklahoma. She earned the MN degree from the University of Washington in Seattle, and the EdD degree from the University of Tulsa.

She has served as director of nursing education at William Newton Memorial Hospital, Winfield, Kansas and as associate executive director of nursing education, Oklahoma Board of Nurse Registration and Nursing Education.

In addition, Dr. Poshek is president of the Oklahoma State Nurses Association and past president of the Oklahoma Board of Nurse Registration. She also serves as an accreditation survey visitor for the National League of Nursing.

Dr. Poshek is a member of several honor societies, including Delta Kappa Gamma, honor society for women educators; Sigma Theta Tau, honor society for nursing; Pi Gamma Mu, social science honor society. She is also listed in *Who's Who in American Women* and *Outstanding Educators of America.*

dean appointed

Dr. Carl O. Davis, professor of oral medicine and dental education, has been appointed associate dean of students in the School of Dentistry at the Medical College of Georgia. He will administer student recruitment, admissions, academic evaluation and other student affairs.

Dr. Davis received his BS from the University of Arkansas and his DDS from the University of Tennessee. He has a MS in oral diagnosis, as well as a MA and PhD from the University of Iowa.

fellowship awarded

Dr. Hubert W. Merchant, associate professor of oral medicine in the MCG School of Dentistry, has been awarded fellowship in the American College of Dentists. Fellowship in the college is by invitation and is given to those individuals who have contributed to the advancement of the profession and to humanity.

committee member

Dr. Jon C. Calvert, chairman of MCG's department of family practice, has been appointed to the committee on clinical investigations for the American Academy of Family Physicians. As a member of the national committee, he will review various research involving clinical investigation.

Dr. Calvert holds the MD and PhD degrees from Baylor University College of Medicine, Houston, Texas.

professor named Georgetown dean

David E. Beaudreau, DDS, MS, a recognized authority in reconstructive dentistry and dental education, has been appointed dean of Georgetown University's School of Dentistry.

Dr. Beaudreau is currently professor of periodontics and restorative dentistry at the Medical College of Georgia, School of Dentistry. He is also director of Continuing Dental Education at MCG.

athletes give to Nancy Cobb House

The Black Athletes Foundation of Pittsburg, Pennsylvania has contributed $2,000 to MCG's Nancy Cobb House.

The Cobb House provides lodging for out-of-town patients referred for examination or treatment at the Medical College's Sickle Cell Center or other MCG Clinics. Lodging is also provided for family members who accompany the patients to Augusta.

This donation will be used to help defray rental costs on the house for the next twelve months.

The "Downright Dirty Shame" (D.D.S.), a group comprised of MCG Faculty and alumni and a local Augusta practitioner, recently performed at the Thomas P. Hinman Meeting held in Atlanta. They are from left to right, Carl Davis, Rick Walton, Charles Morris (all full-time MCG faculty) T. I. Hodges, local practitioner, Van Haywood, MCG alumnus, Jim Davidson, MCG Alumnus and part-time faculty member.

Alumni News Events Activities Class Notes Alumni News Events Activities Class Notes

Deaths

Patrick H. Weeks, Michigan City, Ind., 1911

F. F. Richards, Jacksonville, Fla., 1921

Percy D. Weeks, High Springs, Fla., 1925

Orien T. Gower, Cordele, 1937

SCHOOL OF MEDICINE

Samuel F. Rosen, '29, of Savannah Beach has retired from private practice.

A. Judson Graves, '33, writes that after many years in the private practice of radiology in Jacksonville, Fla., he has now retired and lives on the beautiful Red Fox Golf Course in Tryon, N.C. He continues to work two days a week in radiology and uses the rest of his time to indulge himself in all the pleasures of retirement.

Meyer Schneider, '37, is presently serving a six-year appointment to the Hospital Authority of Chatham County which is the Board of Trustees of the Memorial Medical Center in Savannah.

Walter Martin, '41, a prominent Dawson physician was honored by the Terrell County Hospital Authority for his long and faithful service to the community. The Authority presented his portrait and hung it in the lobby of the hospital. Dr. Martin comes from a long line of doctors and was the 21st member of the Martin family to attend the Medical College of Georgia.

James E. Rountree, '42, has retired from practice of general surgery in Aiken, S.C. where he began practice in 1950.

Herbert U. King, '47, is still the Director of the Voluria County Health Dept. in Daytona Beach, Fla. He has been busy with a multitude of public health programs and now has 6 children and 4 grandchildren.

W. F. Moore, Jr., '49, of Honolulu is on the Board of Directors of the Straub Clinic and Hospital where he is the Chairman of the Dept. of Pediatrics. Dr. Moore is also associate clinical professor at the University of Hawaii School of Medicine.

Nat E. Smith, '49, has accepted the appointment of Associate Dean and Professor of Medicine at Bowman Gray School of Medicine in Winston-Salem, N.C.

A. F. Bloodworth, '50, is the Chairman of the Internal Medicine Section for 1977-78 at the Northeast Georgia Medical Center in Gainesville.

Harrison R. McDonald, '68, completed his dermatology residency at the Naval Hospital in San Diego, Cal.

Fred A. Trest, '68, has passed his certification examinations and is now a diplomate of the American Board of Psychiatry and Neurology.

J. Daniel Hanks, Jr., '69, is now on the staff in diagnostic radiology at Talmadge and the VA Hospital in Augusta.

James W. Jackson, '69, has been board certified in general surgery and is currently in private practice in Savannah. Dr. Jackson is actively involved in the residency teaching program at Memorial Medical Center and with the medical students rotating through surgery at Memorial.

Jabez O. Marshall, '69, has completed two years in the USAF and is now in private practice in Odessa, Texas in the specialty of obstetrics and gynecology.

H. Alan Perry, '69, is practicing general surgery in Birmingham, Ala.

Paul C. Broun, '71, family practitioner, has opened a medical practice in Americus. Dr. Broun is associated with **Dr. Harvey Simpson,** '57, Dr. James Herron, and Dr. Joseph Snead. Dr. Broun is married to the former Anne Jean Owen of Edison.

Donald Richard Lynch, '71, has been in family practice in Waycross since July 1976.

Thomas J. Tidwell, '71, is working as a medical missionary in Ludhiana, India, about 150 miles north of Delhi. He is in charge of the radiology department and anticipates treating about 700 cases per year.

Phillip N. Bannister, '73, has been promoted to Major, U.S. Army Medical Corps. He is now chief resident in ob-gyn at Letterman General Hospital in San Francisco, Cal.

Louis I. Cooper, '73, is presently a senior resident in pediatrics at the National Naval Medical Center in Bethesda, Md. He has accepted a pediatric hematology-oncology fellowship at the Naval Regional Medical Center, San Diego, Cal. Dr. and Mrs. Cooper have a two-year old son, Steven Benjamin and are expecting their second child in the spring.

Mark S. Romoff, '73, says there is nothing new in California except it is great and he offers to show any prospective interns about the Los Angeles County Hospital.

Victor E. Silverman, '73, has passed the boards and is now a diplomate of the American Board of Internal Medicine. He is now doing a two-year fellowship in endocrinology at Baylor Medical Center in Houston. He and his wife, Saba have a three-year old son, Donald.

C. Granville Simmons, '73, has joined Dr. Jack Williams, in the practice of pediatrics in Douglas. Dr. Simmons did his residency work at MCG and he and his wife Kathleen have two sons, David, 3 and Michael, 1.

Charles A. Jenkins, '74, has opened his practice of internal medicine in Cordele. He recently completed a three-year residency at Eastern Virginia Medical School in Norfolk.

Joel F. Ginsberg, '75, and his wife have a 14-month old daughter, Paige Elisabeth. Dr. Ginsberg is searching for a Pulmonary Fellowship for 1978 and was recently hypnotized to stop smoking and writes that it worked!

James R. Hanahan, '75, is now in general practice in Seneca, S.C.

William H. Hammond, '77, has begun a residency in family practice at the Medical Center of Central Georgia in Macon.

Daniel M. Strickland, '77, is now stationed as a resident in ob-gyn at Lackland AFB, Texas with the Wilford Hall USAF Medical Center.

Robert DeLaney, 50, of Marble Falls, Tex., writes that all the marble used in the construction of the new Coca Cola Building in Atlanta will come from his home town.

Zeb L. Burrell, Jr., '52, of Athens anticipates the release of the book, *Critical Cases,* 3rd edition, which was authored by himself and **Lenette Burrell,** MSN, 72.

Dabney H. Brannon, '54, of Fayetteville, Arkansas, has been appointed clinical associate professor of surgery at the University of Arkansas School of Medicine.

Joseph P. Bailey, '55, has been elected President of the Richmond County Medical Society. Other officers are **Charles H. Wray,** 59; president elect; **Jimpsey B. Johnson,** 64, vice president; and **Rufus G. Maloney,** 64, secretary-treasurer.

Stephen C. May, '56, was sworn into the office as president-elect of the Georgia Academy of Family Physicians at the recent 28th Annual Session. The Georgia Academy represents over 550 family practitioners in the State. Dr. May and his wife Nancy, live in Kennesaw and have three children, Lisa, Steve and Wade.

Melvin Spira, '56, has been promoted to Professor and Head, Division of Plastic Surgery, Baylor College of Medicine. Dr. Spira joined the faculty at Baylor in 1961 following completion of his residency in plastic surgery.

Zachary M. Kilpatrick, '59, has been selected to be one of the two Members at Large to serve on the Executive Committee for University Hospital's Medical Staff in Augusta. Dr. Kilpatrick is in the private practice of gastroenterology and is a member of numerous medical societies. He is a part-time associate professor of medicine at MCG and has had over 15 items published.

Cliff L. Cannon, Jr., '61, has been named Chief of Staff for Memorial Medical Center in Savannah. He is certified by the Americn Board of Neurological Surgery and is a member of numerous medical societies.

Don C. Abbott, '65, has joined the medical staff of Baptist Hospital in Columbia, S.C. in the specialty of neurology. Dr. Abbott has taught at the Medical College of Georgia and served his internship at Roanoke Memorial Hospital.

Gordon C. Carson, III, '65, previously certified in radiology (1972) has been certified by the American Board of Nuclear Medicine. He has been appointed chief of nuclear medicine at Candler General Hospital in Savannah and is also the director of the School of Radiologic Technology at that Institution.

R. A. Freeman, '65, has recently passed his boards in plastic and reconstructive surgery and is practicing in Macon.

John M. Fillingim, '66, has been named chief-of-staff elect for Candler General Hospital in Savannah. Dr. Fillingim is a fellow of the American Academy of Family Practice and a diplomate of the American Board of Family Practice.

Ronald Daitch, '67, has been elected a fellow to the American College of Ob-Gyn and is a diplomate of the American Board of Ob-Gyn. He and his wife announce the birth of their third child, Gail Allyson, born September 29, 1976.

Elizabeth Heimberger, '67, and **Dick Heimberger,** (Surgery Resident, 64) are both on the faculty at the University of Missouri School of Medicine. Elizabeth is with the Psychiatric and Family Practice Departments and is the Director of the Family Life Studies Program. Dick is in the Department of Plastic Surgery. They have three children: Margaret, 9, Richard, Jr., 9, and Katy, 6.

SCHOOL OF NURSING

Virginia Zachary Davis, 73, was recently married to Dr. Alan Mark Davis who is a professor of computer science at the University of Tenn. Mrs. Davis is now living in Knoxville working at the Univ. of Tenn. Memorial Research Center and Hospital in the intensive care unit.

Sharon L. Hall, 75, is currently enrolled at the University of Alabama in Birmingham in the masters of nursing program. She expects to graduate in August 1977.

Sandra Nelson Bailey, 76, is a charge nurse at Talmadge Hospital in Augusta.

Susan Frances Brown, 76, is employed with Valdosta State College as an instructor of nursing.

Mary Clare Carroll, 76, is an assistant professor of nursing at the University of S.C. in Spartanburg.

Karen M. Cornelius, 76, is working at Memorial Hospital of Jacksonville as the coordinator of critical care.

Karen Schmidt Ford, '76, is a nurse in the ambulatory center at the University of Alabama Medical Center.

Myra Gail Fuller, 76, is a staff nurse at Kennestone Hospital and lives in Marietta.

Carola Wilson Keller and **Joan Mary Sullivan,** 76, are instructors of nursing at Armstrong State College in Savannah.

Miriam Elaine Kinsey, 76, is a nursing instructor in the Education Services Dept. at the Northeast Georgia Medical Center in Gainesville.

Carole Turner Knox, 76, is an assistant professor of nursing at Brunswick Jr. College.

Mozelle Liner, 76, of Waynesville, N.C. is the director for the Southwestern Technical Institute.

Eloise G. Miller, 76, is the Utilization Review Coordinator at Doctor's Hospital in Augusta.

Judith Smith Moore, 76, is employed with Albany Jr. College as a nursing instructor.

Cyril C. Parker, 76, is an anesthetist in the U.S. Army stationed in El Paso, Texas.

Charlotte Ann Paseur, 76, is the assistant to the Inservice Director at Cobb Memorial Hospital at Ft. Benning, Ga.

Laura Leigh Penton, 76, is a staff nurse in labor and delivery at Dekalb General Hospital in Atlanta.

Shirley Bell Samuels, 76, is working at Gracewood State School and Hospital as a nurses service coordinator.

Glenda Patricia Sims, 76, is employed with the University of S.C. in Spartanburg as an assistant professor of nursing.

Nettie Monroe Slee, 76, is a nursing instructor at Armstrong State College in Savannah.

James Wallace Swenson, 76, is the director of the clinical specialist course in the U.S. Army in Aurora, Col.

Suzanne Tapley, 76, is employed with Doctor's Memorial Hospital in Atlanta as a nursing supervisor.

Marilyn Joy Thompson, 76, is working in the new open heart unit of University Hospital in Augusta.

Laulie Newbury Vinson, 76, is a doctoral student at the University of Texas in Austin.

SCHOOL OF GRADUATE STUDIES

William Davenport, Jr., 76, is an assistant professor of anatomy at the University Medical Center in Jackson, Missippi. He is the Director of Oral Histology and Embryology for the Dental School.

Carol Jean Endebrock, 76 is an instructor in occupational therapy at MCG.

Rodney Cameron Morris, 76, is a sophomore medical student at MCG.

Mark Joseph Rowinski, 76, is a research associate at Emory University in Atlanta.

Gail Ryan Speir, 76, is a post-doctoral fellow at Baylor College of Medicine in Houston.

SCHOOL OF ALLIED HEALTH SCIENCE

Medical Record Administration

Virginia T. Daniell, 71, is the medical

records manager at Candler General Hospital in Savannah.

Occupation Therapy

Mary I. Thornton, 76, is stationed at Beach Pavillion Ft. Sam Houston, Texas. She was recently promoted from 2 Lt to 1st Lieutenant and is engaged to be married in July.

Physician's Assistants

Donald Lee McAlexander, 76, is working with Dr. E. J. Maxwell, Jr. of Augusta as a physician's assistant.
John Charles Pope, 76, is working with Dr. Louis Battey in Augusta.
Henry Wilder Smith, Jr., 76, is working with his father, Dr. H. W. Smith, 46, of Swainsboro.
Joseph Stanley Soparas, 76, is employed with MCG as an instructor in the PA Deparment.
Edward F. Spilker, 76, is a physician's assistant for Dr. David Hleap of Atlanta

Radiologic Technology

Pamelia Anne Hamilton, 76, is a radiologic technican at University Hospital in Augusta.
Ernestine Womack Holton, 76, is employed at MCG in the rad tech department.
JoAnn Parker, 76, is a radiologic tech at Laurens County Memorial Hospital in Dublin.
Jenny Lynn Patch, 76, is employed with University Hospital in Augusta as an x-ray technician.
Celeste Carswell Savage, 76, is a radiologic tech at Talmadge Hospital.
Rebecca Lynn Webb, 76, is an instructor of radiologic technology at MCG.

Dental Hygiene

Marsha A. Jett, 74, is employed in private practice in Aiken, S.C. and was recently elected President of the Georgia Dental Hygienist's Association for 1976-77.
Margaret S. McDowell, 74, is beginning a private practice with her husband who is a dentist. They moved to Ft. Pierce, Fla. in January with their two children who are 7 and 1½. For the past 2½ years Mrs. McDowell has worked for a group of five dentists in St. Petersburg.
Elizabeth A. Roos, 74, continues to work for a pedodontist in Atlanta.
Robert Lawrence Boerckel, 76, is a dental technician for Dr. Kenneth Yost in Augusta.
Thomas Hoyt Dozier, 76, is employed with the Gray Dental Laboratory in Gulf Breeze, Fla. as a dental Laboratory technician.
H. Max Holmes, 76, is a dental technician for Morton Dental Lab, Inc. in Myrtle Beach, S.C.

Medical Technology

Beth Ann Coleman and **Elizabeth Lee Chancellor,** 76, are employed with University Hospital as medical technologists.
Patricia Ellen Noland, 76, is a medical technologists at the Walter Reed Army Medical Center in Washington, D.C.
John Samuel Price, 76, is working at Ft. Gordon as a medical technologist.
Brenda K. Read, 76, is employed by Crawford Long Hospital in Atlanta as a medical technologist.

SCHOOL OF DENTISTRY

Robert L. Gordon, 73, and his wife, Cynthia, announce the birth of their new daughter, Ashley Carol born September 10, 1976. Ashley was welcomed home by her sister, Jennifer, age 20 months.
Melvin O. Baker, 74, has opened his office for the practice of general denistry in Covington. He recently completed a tour of duty with the U.S. Navy in Great Lakes, Ill. Dr. Baker and his wife, Gussie have two sons, Dedric and Rodrick.
J. David Brown, 76, of Sparta, plans to open his office for the practice of general denistry in Watkinsville.
Robert D. Poston, 76, has opened his office in Savannah. He and his wife, Jane, have one son, Benjamin Wade.

150 Years Our Sesquicentennial

To commemorate the 150th anniversary of the Medical College of Georgia, we are asking alumni for old photographs, clippings, books, etc.

We need your help. We are planning to prepare exhibits, displays and some printed material in which the contributions will be used.

To submit photographs, please paste a label containing any pertinent identifying material on the back of each picture. If you would like the photograph(s) returned, also put your name and address on the label. Or, if you wish, the photographs will become part of the School's archives after their use.

Please send all material to MCG Today, Alumni-Foundation House, Medical College of Georgia, Augusta, Georgia 30901.

MCG students in 1896-97 studied chemistry in this chemical laboratory.

The Board of Managers of the MCG School of Medicine Alumni Association have authorized the minting of 1,000 silver coins in commemoration of the 150th year of the Medical College of Georgia.

These coins will be numbered in order to preserve their unique and historical value. The exact cost is not known at this time but a very close estimate is about $30.00 per coin.

Pre-order reservations are now being accepted for the coins. Fill out the attached form and return it to MCG Today with your $10.00 deposit.

These coins are being offered first to MCG alumni and, if any are unreserved, they will be offered to non-alumni.

PRE-ORDER COUPON

_____Please reserve _____ Sesquicentennial silver coins for me. I will purchase these when they are minted later this year. A $10 deposit per coin is enclosed in order to allow the association to make a deposit with the mint.

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